SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 / 47 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) PROTECTIVE LIFE CORPORATION	Statements may not be sold or used by any pers le name and address of any political committee t I FEDERAL PAC	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) JOHN D. JOHNS Mailing Address 2749 SOUTHWOOD City BIRMINGHAM FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE CORPORATION Receipt For: Primary General Other (specify)	RD. State Zip Code AL 35223 C Occupation PRESIDENT Aggregate Year-to-Date 4999.25	Date of Receipt 0 5 3 1 2 0 0 9 Transaction ID: B001949S000007L11A Amount of Each Receipt this Period 218.00 PAYROLL DEDUCTION
Full Name (Last, First, Middle Initial) CAROLYN JOHNSON Mailing Address 2537 DOLLY RIDGE City BIRMINGHAM FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Receipt For: Primary General Other (specify)	ROAD State Zip Code AL 35243 C Occupation EXECUTIVE VICE PRESIDENT Aggregate Year-to-Date 900.00	Date of Receipt M M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) CAROLYN JOHNSON Mailing Address 2537 DOLLY RIDGE City BIRMINGHAM FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Receipt For: Primary General Other (specify)	ROAD State Zip Code AL 35243 C Occupation EXECUTIVE VICE PRESIDENT Aggregate Year-to-Date 900.00	Date of Receipt M M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		368.00